

**MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET**

SERIAL NO. 742123

FILING DATE

APPLICANT(S)

**CLAIMS**

	AD FLDG		ADDITIONAL ASSIGNMENT		ADDITIONAL ASSIGNMENT	
	CHD	DEP	CHD	DEP	CHD	DEP
1	1					
2		1				
3		1				
4		1				
5		1				
6		1				
7		2				
8		2				
9	1					
10	1					
11		1				
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TOTAL NO.	3					
TOTAL DEP.	3					
TOTAL CLAIMS	16					

	AD FLDG		ADDITIONAL ASSIGNMENT		ADDITIONAL ASSIGNMENT	
	CHD	DEP	CHD	DEP	CHD	DEP
51						
52						
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TOTAL CLAIMS						